

OCT 19 1967



NATIONAL CENTER FOR
CHRONIC DISEASE CONTROL

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

4040 North Fairfax Drive
Arlington, Virginia 22203

REFER TO: KDC/PP

OCT 16 1967

Joshua Lederberg, M.D.
Professor of Genetics
Stanford University
School of Medicine
Palo Alto, California 94305

Dear Dr. Lederberg:

For the past few months I have been reviewing the literature on the ethics of human experimentation and have come across many articles written by you on this and related subjects.

In my capacity as a medical consultant with the Kidney Disease Control Program (National Center for Chronic Disease Control, U.S. Public Health Service), I plan to investigate the legal and ethical problems of kidney transplantation. In the past most of the emphasis of this Program has been directed to establishing hemodialysis centers throughout the country. As a result of recent advances in surgical technique and immuno-suppressive therapy, permitting kidney transplantation to reach the point of technical feasibility, there is now an interest in our Program to pursue the possibilities of providing support for kidney transplantation facilities.

Recognizing your interest in the moral concerns of medicine, I would appreciate your comments on the following ethical and legal considerations relevant to kidney transplantation:

1. Informed Consent: This is important in regard to the donor who benefits little from the procedure. Who should decide where minors are involved?
2. Selection of Recipient: What are the limitations? Should they be defined in terms of age, social worth, education, number of dependents, complicating systemic disease, etc.?
3. Procurement of Kidneys:
 - a. living donors
 - b. cadavers: There is a wide diversity of laws in the states on the rights of the decedent to will his kidneys

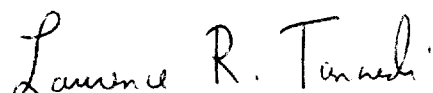
and on transporting kidneys across state boundaries. What can be done to promote uniformity of legislation to facilitate maximum procurement of kidneys for the greatest number of patients?

4. Re-definition of Death: It may be necessary to re-define the moment of death in the light of modern medical realities, and needs to promptly secure kidneys for transplantation before they are unusable.

In addition, I would like your opinion as to how the Public Health Service could assist in defining and hopefully resolving these pressing problems.

I look forward to hearing from you in the future.

Sincerely yours,

A handwritten signature in cursive script that reads "Laurence R. Tancredi".

Laurence R. Tancredi, M.D.
Medical Consultant
Preventive Programs Section
Kidney Disease Control Program
National Center for Chronic Disease
Control